PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application or Docket Number												ıber
. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(3				Г	RATE	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		- ⊩	ASIC FEE		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		* 37			X\$ 9=		OR	X\$18=	594
INDEPENDENT CLAIMS			2 minus 3 =		* (		·	X40=		1 1	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				H			OR		400
* If the difference in column 1 is			less than zero, enter "0"			+135=				OR	+270=	
			·				•	TOTAL	L	OR	TOTAL	1704
CLAIMS AS A (Column 1)			MENDED	<b>PAR - (</b> Coluı)		(Column 3)	ç	SMALL E	NTITY	OR	OTHER SMALL I	
	CLAIMS		HIC		IEST		Ē		ADDI-	) 	O.IALE	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	, <b>**</b>		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L`	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM			.125_			+270=	
							L	+135= TOTAL		OR	TOTAL	
								DIT. FEE		OR ,	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colui		(Column 3)	·					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		]=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							<b>Ľ</b> ∆D	TOTAL DIT. FEE	,	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								011.1 CC			A0011. 1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	<del></del>	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	l ⊢	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPEN				CLAIM			A40=		OR	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
* If the optivity is column 1 is less than the optivity solvery 0 with 107 is active 0								<b>⊦135</b> =		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa ber Previously Pa							ropriate box			